

IA 1065 1998

Partnership Return of Income

FOR CALENDAR YEAR 1998 OR OTHER F	ISCAL YE	AR						
From/ to/	🛦							
Please Type or Print								
TYPE OF RETURN (check one) Partnership Limited Liability Co.					Mail This Return To: INCOME TAX RETURN PROCESSING			
PRINT NAME AND BUSINESS ADDRESS OF THE ORGANIZATION					HOOVER STATE OF DES MOINES IA 50			
Name of Partnership					DEC MONVEO IA 30	013 0120		
Street Address					Federal Iden	tification No		
					rederal identification No.			
City	State	ZIP Code						
PART I - MODIFICATION OF PARTNERSHI	P INCOM	E						
1.Federal partnership taxable income (loss)), from Fe	deral Schedule K			1			
2.Interest from state and municipal bonds a	and securi	ties	2					
3.Other additions (see instructions)	Other additions (see instructions) 33							
4. Total additions (add lines 2 and 3)					4			
5.Interest and dividends from Federal secu	rities		5					
6.Other reductions (see instructions)			6					
7.Total reductions (add lines 5 and 6)	add lines 5 and 6)							
8.Net modifications (line 4 less line 7)								
9. Total all-source partnership income (line	1 plus line	9 8)			9			
PART II - PARTNER'S SHARES OF MODIF	ICATIONS	S AND INCOME						
IMPORTANT - Each nonresident partner wi	th \$1,000	or more in net inco	me from	lowa sources	may be required	to file an Iowa		
individual tax return. (1)	(2)	(3)	(4)	(5)	(6)	(7)		
Partner's Name and Address		Social Security No.	% of	Partner's	Partner's	Partner's		
	Non-		Partner's	Share of Ne Modifications		Apportioned		
Δ	resident	Number	Interest	Modifications	s Income	Income		
A		_	0/					
В.		_	%					
		_	0/					
C.		_	%					
		_	%			_		
D.			,,					
		_	%			_		
E.			,,					
A		A	%			4		
Check if additional partners. Attach schedule.		TOTALS	100%		_			
PART III - Enter lowa net income for three preceding years:	1995		1996 _		1997			
PART IV - FEDERAL PARTNERSHIP RETURN: Attach a comp Large Partnerships, including Schedules K-1 for each partner ar						rn of Income for Electing		
TO THE TAXPAYER: The lowa Partnership Return is used for inf If a partner is a corporation, partnership income must be include				ust report their port	ion of partnership income	on their individual returr		
DECLARATION: The undersigned hereby certifies and declares and belief of the undersigned, it is a true, correct and complete rethereunder.	s that this retur eturn for the ta	n together with any schedule exable year as required by the	s or papers at e income tax l	ttached hereto, has aw of the State of Id	been duly examined; that to owa and the rules and regu	to the best knowledge ulations issued		
Signature of Partner or Member	Date							
Signature of Preparer Other Than Partner or Member	ember			ess	Date			



Nonresident Partners Only

	Partner Information:					
lame	Name					
ederal ID No	SSN					
(a) Partner's Pro Rata Share Items		(b) Federal K-1 Amount	(c) Iowa Business Activity Ratio	(d) Amt. Apportionable To lowa		
Ordinary income (loss) from trade or business activities	1	Amount	Activity Natio	TOTOWA		
Net income (loss) from rental real estate activities						
Net income (loss) from other rental activities						
Portfolio income (loss)						
a) Interest	4a					
b) Dividends						
c) Royalties	T					
d) Net short-term capital gain (loss)						
e) Net long-term capital gain (loss) [line 4e(2), Federal Schedule K						
f) Other portfolio income (loss)	-					
Guaranteed payments to partner						
Net gain (loss) under section 1231 (other than due to casualty or the						
Other income (loss)						
Charitable contributions						
Section 179 expense deduction	T					
Deductions related to portfolio income						
Other deductions	T					
a) Interest expense on investment debts						
b) (1) Investment income included on lines 4a through 4f above .						
(2) Investment expenses included on line 10 above						
Credits from the credit section of Federal K-1 (attach schedule)						
a) Depreciation adjustment on property placed in service after 198						
b) Adjusted gain or loss						
d) (1) Gross income from oil, gas, or geothermal properties(2) Deductions allocable to oil, gas, or geothermal properties	· · ·					
e) Other adjustments and tax preference items (attach schedule)	` ′					
Enter any supplemental information that is required to be reported		tner for filing wi	th Federal form 10)65 K-1.		
Enter any supplemental information that is required to be reported Attach additional schedules if more space is needed.	separately to each par	tner for filing wi	ith Federal form 10	065 K-1.		
NONRESIDENT MO	ODIFICATIONS SCHED	_	16			
lowa business activity ratio						
			18			

This schedule apportions the nonresident partner's K-1 items to lowa with the apportioned amounts appearing in column d of the form. The nonresident partner's all-source modifications from column 5 Part II of the IA 1065 are apportioned to lowa on lines 16 through 18 of the lowa partnership K-1. There is no lowa partnership K-1 for lowa residents. A copy of the Federal K-1 will suffice for lowa resident partners. An Electing Large Partnership must adapt the nonresident partner's lowa K-1, column b, to report income as shown on the K-1 for Federal form 1065-B.

NOTE: State tax information may be disclosed to tax officials of another state or to the United States for **tax** administration **purposes.**

Column b, lines 1 through 14(e): Enter the same amounts as shown on your Federal K-1

Column c, lines 1 through 14(e): Enter the Iowa single factor business activity ratio that you have calculated on a separate worksheet. Iowa uses a single factor business activity ratio based on the ratio of Iowa sales or gross receipts to total sales or gross receipts.

Column d, lines 1 through 14(e): Multiply the amounts in column b by the percentage in column c and enter the product in column d. This is the amount apportionable to Iowa.

Line 16: Enter the nonresident partner's all-source modifications as shown in column 5 Part II of the IA 1065.

Line 17: Enter the Iowa single factor business activity ratio.

Line 18: Multiply line 16 by the percentage on line 17 and enter here. If this entry is a positive amount, also enter it on line 14 of your IA 126 form. If this entry is a negative amount, enter it on line 24 of your IA 126 form.